Date	Section	Page(s)	Change
12-01-10	Cover	-	Replaced "Medicaid Provider Manual" with "South Carolina Healthy Connections (Medicaid)"
12-01-10	Appendices	-	Replaced "South Carolina Medicaid" with "South Carolina Healthy Connections (Medicaid)" in the headers
12-01-10	Supplements	-	Replaced "South Carolina Medicaid" with "South Carolina Healthy Connections (Medicaid)" in the headers
11-01-10	5	5, 14	Correct formatting
11-01-10	Appendix 1	8 16 32 51 52	 Edit code 202: added information to Resolution section Edit codes 421 and 424 deleted Edit code 733 information updated in Resolution section: "Adjust the net charge in field" changed from 26 to 29 Deleted edit code 959 Deleted edit codes 962 and 963
11-01-10	TPL Supplement	3, 8, 13-14, 18-19 6, 15-17	 Updated to reflect Medicaid Bulletin dated July 8, 2010 – Transfer of the Dental Program Administration to DentaQuest Updated to reflect Medicaid Bulletin dated September 13, 2010 – Changes to the Third Party Liability Medicare Recovery Cycle
10-01-10	1	1 7	 Removed all reference to the SCHIP program to reflect Medicaid Bulletin dated August 19, 2010 Changes to the Healthy Connections Kids (HCK) Program Updated Program Description section Updated the SC Medicaid Web-Based Claims Submission Tool section to reflect Medicaid Bulletin dated July 8, 2010-Transfer of the Dental Program Administration to DentaQuest Updated Freedom of Choice section
10-01-10	5		Correct McCormick county office street address
10-01-10	Managed		Removed all references to the SCHIP program to

Date	Section	Page(s)	Change
	Care Supplement	1 2 3 4 5 6 13 17	reflect Medicaid Bulletin dated August 19, 2010 - Changes to the Healthy Connections Kids (HCK) Program • Updated Managed Care Overview • Updated Managed Care Organizations and Core Benefits paragraphs • Updated MCO Program ID card paragraph • Updated MHN Program ID card paragraph • Updated Core Benefits • Updated Exempt Services • Updated Overview • Deleted "Medicaid Managed" from "Current Medicaid Managed Care Organizations" heading and following paragraph
09-01-10	3	20 20-21 38	Updated the following sections to reflect Medicaid Bulletin dated July 8, 2010 – Transfer of the Dental Program Administration to DentaQuest: Companion Guides South Carolina Medicaid Web-based Claims Submission Tool Claim-Level Adjustments
09-01-10	5	5 8 11	 Removed County Commissioner's Building from the Aiken County address Deleted Dorchester County physical address telephone number Removed Highway 28 N from the McCormick County address
09-01-10	Appendix 1	9 -	 Added edit code 225 Removed all references to the ADA Claim in the Resolution column
09-01-10	TPL Supplement	12 13 18	 Updated the Dental Paper Claims section to delete paper claims submission instructions and added the DentaQuest contact information Updated the Web-Submitted Claims section with the exception to Dental claims Updated the TPL Resources section to include the DentaQuest contact information for TPL questions

Date	Section	Page(s)	Change
08-01-10	5	5, 9, 11-13 6	 Updated the zip codes for Aiken, Edgefield, McCormick, Newberry, and Saluda counties Updated the address for Barnwell County Updated the telephone number for Beaufort County
08-01-10	Appendix 1	20 51, 52 59	 Deleted edit code 520 Deleted Provider Enrollment e-mail address from codes 941 and 944 Changed resolution for edit code 994
07-01-10	5	-	Updated telephone numbers and zip codes for multiple county offices
07-01-10	Appendix 1	32 35	Updated edit code 714Updated edit code 738
07-01-10	Appendix 2	21, 22, 25, 63, 89	Changed First Health to Magellan Medicaid Administration
06-01-10	Managed Care Supplement	1 3 17 20, 23, 25	 Updated Managed Care Overview section Updated Manage Care Organization (MCO), Core Benefits section Updated the Managed Care Disenrollment Process, Overview section Updated to reflect Medicaid Bulletin dated March 18, 2010 — Managed Care Organizational Change
05-01-10	5	1	 Removed reference to sample form at the end of this section Replaced reference to sample form in the Forms section of this manual
03-01-10	Cover	-	Replaced the manual cover
03-01-10	Change Control Record	1	Added Time Limit for Submitting Claims Medicaid Bulletin date to section 1 and section 3 entries dated 12-01-09
03-01-10	3	5, 20	Removed modem as an electronic claims transmission method

Date	Section	Page(s)	Change
02-01-10	Appendix 1	13 36	Added New Edit Codes 356,357 and 358Updated Edit Code 738
02-01-10	Appendix 2	All	Updated Carrier Code List
01-01-10	5	5 10 12	 Updated Physical Address for Allendale County Office Replaced Jasper County DSS with Jasper County DHHS Replaced Orangeburg County DSS with Orangeburg County DHHS
01-01-10	Appendix 1	49	Updated Edit Code 932
12-01-09	1	8 25	 Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package Updated Timely Filing for Submitting Claims section to reflect Medicaid Bulletin dated November 24, 2009
12-01-09	3	1-2 19, 21, 23-26	 Updated Claim Filing Timeliness section to reflect Medicaid Bulletin dated November 24, 2009 Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package
12-01-09	5	8	Updated the Dorchester County office street address
12-01-09	Appendix 1	- 18, 19 20	 Replaced CARC 17 with CARC 16 Updated CARC A1 Updated codes 509 and 510 Added code 533
11-01-09	Appendix 2	All	Updated carrier code list
10-01-09	1	3-4 4-6	 Updated the Medicare/Medicaid Eligibility section to include Qualified Medicare Beneficiaries (QMBs) Updated SC Medicaid Healthy Connections language throughout section Updated South Carolina Medicaid Bulletins and

Date	Section	Page(s)	Change
		26	Newsletters • Changed heading to Medicare Cost Sharing
10-01-09	5	10 11 12	 Updated physical address for Jasper County office Updated telephone number for Lexington County office Updated zip codes for Orangeburg County office
10-01-09	Appendix 1	3 60	Updated edit code 065Updated edit code 852
09-08-09	Managed Care Supplement	20	Replaced the Absolute Total Care Medicaid beneficiary card sample
09-01-09	2	1 18	 Removed the 50 visits per limit requirement Reinstated venipuncture to reflect Medicaid Bulletin dated March 27, 2009
09-01-09	4	1	Corrected the Social Work Services code, S9127
09-01-09	Managed Care Supplement	21 20, 25	 Removed all references to CHCcares to reflect Medicaid Bulletin dated August 3, 2009 Updated Absolute Total Care entries as following: Changed the company's name to Absolute Total Care Replaced the beneficiary card samples Corrected contact information
08-01-09	5	14	Updated telephone number for York County office
08-01-09	Appendix 1	3	Updated edit code 062
08-01-09	Appendix 2	-	Updated carrier code list
07-01-09	5	6, 12 8 9	 Updated address for Bamberg and Orangeburg County offices Updated office zip code for Darlington County Updated telephone number for Fairfield County office

Date	Section	Page(s)	Change
06-01-09	TPL Supplement	19	Updated Department of Insurance Web site address
05-01-09	1	1-6, 11 2 3 5 28-33	 Updated to reflect managed care policies and procedures effective May 1, 2009 Updated the Eligibility subsection Added the beneficiary contact telephone number to the South Carolina Healthy Connections Medicaid Card subsection Removed the program start date from the SC Healthy Connections Kids SCHIP Dental Coverage subsection Updated the Medicaid Program Integrity subsection
05-01-09	5	13	Updated telephone number for Union County office
05-01-09	Appendix 1	43	Deleted edit code 694
05-01-09	Appendix 2	-	Updated list of carrier codes
05-01-09	Managed Care Supplement	-	Updated supplement to include general policies and procedures effective May 1, 2009
04-01-09	1	2, 3, 8	Updated hyperlinks
04-01-09	3	4, 6-8, 19, 25, 33, 36	Updated hyperlinks
04-01-09	5	11	Updated telephone number for Lexington County office
03-01-09	5	3-4 8 5, 11-13	 Updated hyperlinks Corrected Dorchester County's Orangeburg Road telephone number Change DSS to DHHS in addresses for Abbeville, McCormick, Newberry, and Saluda counties
03-01-09	Appendix 1	43 72	Added new edit codes 693 and 694Changed edit code 945 Resolution to input

Date	Section	Page(s)	Change
			"26"modifier in field 18
03-01-09	Managed Care Supplement	1, 7, 10, 17, 23, 25- 30, 35	Updated hyperlinks
03-01-09	TPL Supplement	8, 9, 19	Updated hyperlinks
02-01-09	5	5	Updated Allendale County office PO Box zip code
02-01-09	Forms	-	Updated Authorization Agreement for Electronic Funds Transfer (EFT) form
02-01-09	Appendix 2	1	Updated list of carrier codes
01-01-09	1	8	Updated hyperlink for bulletin.scdhhs.gov
01-01-09	2	1 10 17, 18, 19	 Changed visit count from 75 to 50 Changed visit count from 75 to 50 Deleted section entitled "Venipuncture/ Visits" and added Venipuncture with effective date to list of non-covered services
01-01-09	4	1	Removed procedure codes 36415 and T1021 for Venipuncture visits
01-01-09	5	11	Updated Lee County office address
11-01-08	1	8	Added e-bulletin information to reflect Medicaid Bulletin dated August 26, 2008
11-01-08	3	23, 25	Added EFT information to reflect Medicaid Bulletin dated August 26, 2008
10-01-08	5	9, 13	 Updated address for Lake City Updated phone number for Sumter County office
10-01-08	Forms	-	Revised ECF example to show update for field 1
10-01-08	Appendix 1	-	Updated edit codes 007, 059, 112, 219, 308, 339, 386, 403, 710, 722, 786, 798, 799, 843, 844, 845,

Date	Section	Page(s)	Change
			912, 914, 928, 941, 942, 943, 945, 952
09-01-08	5	6	Updated phone number for Berkeley County office
09-01-08	5	10	Updated phone number for Kershaw County office
09-01-08	Appendix 1	17	Added Edit Code 318
08-01-08	Appendix 1	3	Updated Edit Code 062
08-01-08	5	7	Deleted PO Box for Chester County
07-01-08	5	11	Deleted PO Box for Lancaster County
07-01-08	Managed Care Supplement	27	Replaced Web site address for BlueChoice
06-01-08	3	8, 15, 17, 18, 23	Updated NPI policy and form instructions to reflect May 23, 2008, deadline requiring NPI only on claims for typical providers
06-01-08	5	12	Updated telephone number for Orangeburg county office
06-01-08	Appendix 1	30, 39, 42	 Added new edit code 529 Deleted NPI warning edits 578, 579, 580, 581, 582, 583, 692
06-01-08	TPL Supplement	-	Updated Example Dental Claim Form Reporting Third-Party for Medicare Information to show NPI only; change/removed sample entries for fields 8, 15, 23, and 49; and added a tooth number to line 4
05-01-08	Appendix 1	3, 38 31	Revised edit codes 062 and 569Added edit code 520
05-01-08	Managed Care Supplement	-	Revised supplement to include general policies and procedures effective May 1, 2008 and updated the SCDHHS-approved MCO contractors section
04-01-08	5	8	Updated references to location of forms from Section 5 to Forms section

Date	Section	Page(s)	Change
04-01-08	Appendix 1	4, 13, 20, 33	Added new edit codes 062, 219, 339, 538
04-01-08	TPL Supplement	2 3, 8, 15 12 29	 Updated reference to Medicaid card name Changed references to location of forms from Section 5 to Forms section Updated field numbers for occurrence codes on UB-04 Replaced sample ADA form with more attractive version
03-01-08	1	3-5 7	 Replaced sample Partners for Health Medicaid card with new Healthy Connections card and updated card information. Deleted information about location of supervising entities – requirements will be included in Section 2 where applicable
03-01-08	3	8-20 All	 Updated NPI policy and form instructions to reflect March 1, 2008, deadline requiring NPI on claims for typical providers (with or without Medicaid legacy number). Standardized formatting
03-01-08	Forms	-	Replaced Form 931 with new version dated January 2008
03-01-08	Appendix 1	59	 Added edit code 808 Revised edit code 943 description and status (from warning to active)
03-01-08	TPL Supplement	9 21-22	 Added information on carrier code "CAS" for open casualty cases Replaced Form 931 samples with new versions
02-04-08	2	4, 14-15, 19 5	 Added policies and procedures for social work services in accordance with Medicaid Bulletin dated January 10, 2008 Revised definition of homebound status
02-04-08	4	1	Added procedure code for social work services in

Section	Page(s)	Change
		accordance with Medicaid Bulletin dated January 10, 2008
3	11 27, 30 43	 Corrected instructions for field 10b Standardized references to six-character legacy provider number Corrected mailing address for refunds
5	1	Removed "including Partners for Health" from first paragraph
Forms	-	Corrected mailing address for Medicaid Refunds Form 205
5	10	Updated address for Lancaster County office
Managed Care Supplement	1 3	 Removed PhyTrust from the list of MHNs Added Carolina Crescent to the list of MCOs
5	9, 10 10	 Updated telephone numbers for Florence and Kershaw counties Updated Horry County address to 1601 11th Ave., 1st Floor
Appendix 1	All	 Corrected ECF field numbers throughout edit resolution instructions Added new edit code 107
Appendix 2	All	Updated list of carrier codes
1	1-2 3	 Removed PEP information Added information about managed care enrollment broker and Managed Care Supplement
	4	Removed managed care sample cards (cards and other information will appear in the new Managed Care Supplement).
	12 15	 Clarified that "days" refers to business days Clarified which sections of manual may contain PA information Expanded provider list under Program Integrity
	5 Forms 5 Managed Care Supplement 5 Appendix 1	3 11 27, 30 43 5 1

Date	Section	Page(s)	Change
10-01-07	3	13, 43	 Removed PEP information Added 90-day time limit for reversing refunds
10-01-07	Appendix 1	26 38-40, 43, 70	 Corrected description for edit code 502 Added NPI warning edits 578-583, 692, 943
10-01-07	-	-	Added Managed Care Supplement
10-01-07	TPL Supplement	15-17	 Added 90-day time limit for reversing refunds Added information on Part B timely filing schedule to explain which claims are pulled into Retro Medicare
07-01-07	1	All	Revised policies and procedures throughout section
07-01-07	Forms	-	Updated DHHS Form 205
07-01-07	Appendix 2	-	Updated list of carrier codes
06-01-07	3	-	Removed Time Restricted Supplement
06-01-07	3	All	 Updated form completion instructions for new CMS-1500 and Form 130 versions Updated ECF and RA descriptions Added information about National Provider Identifier Replaced Reference to Forms 110 and 120 with Form 115 Clarified retroactive eligibility policy Updated ECF correction instructions Added CPT and HCPCS ordering information Made minor editorial changes throughout section
06-01-07	5	3-4 6-8 12	 Revised "Procurement of Forms" to address new CMS-1500 version and updated vendor information Added toll-free number for Berkeley, Charleston, and Darlington county offices Updated phone number for Oconee County Split forms and exhibits from Section 5 to create separate Forms section

Date	Section	Page(s)	Change
06-01-07	Forms	-	 Updated DHHS forms to add National Provider Identifier field Updated sample claims to new CMS-1500 version Updated ECF and remits to new versions
06-01-07	Appendix 1	-	Updated list of edit codes
06-01-07	TPL Supplement	All	 Updated all sample form sand claims with new versions Updated form completion instructions to match new form versions
05-01-07	Appendix 1	-	Updated list of edit codes
04-01-07	5	8	Updated phone number for Darlington county office
04-01-07	Appendix 1	-	Updated list of edit codes
04-01-07	Appendix 2	-	Updated list of carrier codes
04-01-07	Time Restricted Supplement	-	Updated date for mandatory use of revised CMS-1500
03-01-07	5	6	Updated Barnwell office county office address
03-01-07	Time Restricted Supplement	-	Removed all references to NDC quantity and unit
03-01-07	Appendix 1	-	Updated list of edit codes
02-01-07	TPL Supplement	31-32	Updated ECF Samples to Show third payer line
01-01-07	3	-	Added Time Restricted Supplement
01-01-07	5	-	Added line "03" to sample ECF for the third payer declaration
01-01-07	Appendix 1	9, 14	Added Edit Codes 202, 203, 204, 301

Date	Section	Page(s)	Change
01-01-07	Appendix 2	-	Updated list of carrier codes
11-01-06	5	-	Updated county office addresses
10-01-06	5	-	Updated county office addresses
10-01-06	Appendix 2	-	Updated list of carrier codes
09-01-06	5	-	Updated county offices addresses
09-01-06	Appendix 1	10,11,13 15,17,18 22, 23, 24 26, 27, 28 29, 30, 31 32, 35, 36 39, 40, 41 42, 46, 47 48, 49, 50 52, 58, 60 61, 62, 63 66, 67	 Updated CARCs for edit codes 504, 561, 562, 563, 636, 923, 940, 949 Updated RARCs for edit codes 207, 208, 227, 234, 239, 263, 317, 369, 377, 421, 501, 504, 505, 507, 508, 515, 541, 545, 553, 564, 570, 672, 674, 709, 714, 719, 721, 722, 748, 749 Updated resolutions for edit codes 761, 764, 765 768, 769, 771, 772, 773, 774 Added new edit codes 518, 724 Deleted edit code 777
08-01-06	-	-	Added TPL Supplement
08-01-06	5	-	Updated Reasonable Effort Documentation form
07-01-06	Appendix 1	23, 60, 61	Updated resolution for edit codes 504, 923, 940
07-01-06	Appendix 2	-	Updated list of carrier codes
05-01-06	Appendix 1	52	Updated resolution for edit code 852
04-01-06	Appendix 1	43	Updated resolution for edit code 735
04-01-06	Appendix 2	-	Updated list of carrier codes
03-01-06	3	4, 16 18 23	 Changed the Trading Partner Agreement (TPA) and the Companion Guides Web site references to www.dhhs.state.sc.us Changed the Internet Explorer version required for the Web Tool to 6.0 Added TPL indicators to the ECF field 4

Date	Section	Page(s)	Change
		23 38	 description Added Injury Code indicators to the ECF field 5 description Changed address name for refund checks (Form 205) from Division of Finance to Cash Receipts
03-01-06	Appendix 1	60	Changed resolution for edit code 925
02-01-06	Appendix 1	41	Changed resolution for edit code 721
01-01-06	5	-	Updated Authorization Agreement for Electronic Funds Transfer
01-01-06	1	4 & 5	Removed SILVERxCARD sample and program description
01-01-06	Appendix 2	-	Updated list of carrier codes
01-01-06	Appendix 1	67	Added edit code 935
12-01-05	Appendix 1	70	Added edit code 949
11-01-05	1	6, 7	Removed "HIPAA" from names of S.C. Medicaid Provider Outreach and S.C. Medicaid EDI Support Center
11-01-05	3	6	Changed verb tense under Procedural Coding and Diagnostic Codes
11-01-05	3	13	Removed requirement for entering whole numbers for day or units in field 24G
11-01-05	3	4, 17, 18 32	Changed generic reference for the South Carolina Medicaid Web-based Claims Submission Tool from SCMWBCST to Web Tool
11-01-05	3	4, 16	Changed Web site from www.scdhhshipaa.org to www.scmedicaidprovider.org
11-01-05	5	5-14	Updated list of DHHS county offices
10-01-05	5	5-14	Updated list of DHHS county offices

Date	Section	Page(s)	Change
10-01-05	Appendices	-	Made each appendix a separate file; moved Change Control Record out of appendices to a separate file
09-01-05	Appendix 2	All	Updated lists of carrier codes
09-01-05	Appendix 1	38 & 64	Added edit codes 577 and 900
08-01-05	Appendix 1	A1-62	Added edit code 868
07-01-05	3	2, 9, 11, 17, 18, 27, 28	 Added description of new Web Tool features Removed instruction to attach EOB to paper claims Change MIVS zip code to 29211-9804 (from 29201)
07-01-05	Appendix 2	All	Updated lists of carrier codes
03-02-05	5	10 & 11	Changed incorrect area codes for county offices in Saluda and Union to (864)
03-01-05	Appendices	All	Added new edit codes and changed some resolutions
02-11-05	5	4	Updated manual ordering information under Web Address header